

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Richard H. Forde

Mailing Address 5 Brighton Ln

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE
CO

Occupation

Svp Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	1	0

Transaction ID: 20100412-1011-23-35

Amount of Each Receipt this Period

90.00

B.

Full Name (Last, First, Middle Initial)

Richard H. Forde

Mailing Address 5 Brighton Ln

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE
CO

Occupation

Svp Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	9	/	2	0	1	0

Transaction ID: 20100426-1011-23-32

Amount of Each Receipt this Period

90.00

C.

Full Name (Last, First, Middle Initial)

David J. Giannoni

Mailing Address 2030 James Farm Rd

City

Stratford

State

CT

Zip Code

06614

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE
CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	1	/	2	0	1	0

Transaction ID: 20100329-4718-23-35

Amount of Each Receipt this Period

320.33

SUBTOTAL of Receipts This Page (optional)

500.33

TOTAL This Period (last page this line number only)